



Georgia Department of Agriculture

Fuel & Measures Division • Capitol Square • Atlanta, Georgia 30334-4201

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Tommy Irvin
Commissioner

APPLICATION FOR CERTIFIED PUBLIC WEIGHERS LICENSE

I, (print name legibly) _____

A citizen of the United States, residing at _____,
in the county of _____ and employed by _____

located at _____,

have familiarized myself with the law relative to licensing of Certified Public Weighers, do hereby make application for license permit as a Certified Public Weigher. I certify that I am morally and physically fit to perform the duties imposed upon a Certified Public Weigher, and that I will, if licensed, faithfully and accurately make true recordings, and will comply with the law, rules and regulations relating to Certified Public Weighers to the best of my knowledge and ability.

Signed _____ **Date** _____

Company phone number _____

Company FAX number _____

Contact Person _____

We, the undersigned, being citizens of Georgia, do hereby certify that the applicant herein is a person of good moral character and that the statements made in the foregoing application are true to the best of our knowledge and belief and that our endorsement is without fear of embarrassment.

Name	Address	Phone
_____	_____	_____
Name	Address	Phone
_____	_____	_____
Name	Address	Phone
_____	_____	_____

CIRCLE: {RUBBER} or {CRIMP} FOR THE SEAL THAT YOU WANT ORDERED

GEORGIA DEPARTMENT OF AGRICULTURE USE ONLY

CPW SEAL # _____ **CPW LIC.#** _____